Attorney Docket No. <u>1018798-000214</u>

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re P	atent Application of	MAIL STOP AMENDMENT						
Helena	a Corneliusson)	Group Art Unit: 3761						
Applica	ation No.: 10/790,793	Examiner: KARIN M REICHLE						
Filing I	Date: March 3, 2004	Confirmation No.: 4388						
Title:	ABSORBENT ARTICLE							
))							
)							
	AMENDMENT/REPLY TRA	NSMITTAL LETTER						
P.O. E	nissioner for Patents Box 1450 ndria, VA 22313-1450							
Sir:								
Enclos	sed is a reply for the above-identified patent	application.						
	A Petition for Extension of Time is enclosed.							
	Terminal Disclaimer(s) and the \$\bigcup \$70 \$\bigcup \$140 fee per Disclaimer due under 37 C.F.R. \ 1.20(d) are enclosed.							
\boxtimes	Also enclosed is/are: Replacement Drawings (3 Sheets, Figs. 1-4)							
	Small entity status is hereby claimed.							
	Applicant(s) requests continued examination under 37 C.F.R. § 1.114 and enclose the \$\sum \\$ 405 \$\sum \\$ 810 fee due under 37 C.F.R. § 1.17(e).							
	Applicant(s) requests that any previously usentered. Continued examination is requestidentified above.	unentered after final amendments <u>not</u> be sted based on the enclosed documents						
	Applicant(s) previously submittedcontinued examination is requested.	on for which						
	Applicant(s) requests suspension of action, which does not exceed in accordance with 37 C.F.R. § 1.103(c). is enclosed.	n by the Office until at least d three months from the filing of this RCE, The required fee under 37 C.F.R. § 1.17(i)						
	A Request for Entry and Consideration of (1809/2809) is also enclosed.	Submission under 37 C.F.R. § 1.129(a)						

\boxtimes	No additional claim fee is required.									
	An additional claim fee is required, and is calculated as shown below:									
AMENDED CLAIMS										
		No. of Claims	Highest No. of Claims Previously Paid For	Extra Claims	Rate	Additio	onal Fee			
Total Claims		13	20	0	x \$ 52 (1202)	\$	0			
Independent Claims		2	3	0	x \$ 220 (1201)		0			
☐ If Amendment adds multiple dependent claims, add \$ 390 (1203)							0			
Total Claim Amendment Fee							0			
☐ Small Entity Status claimed - subtract 50% of Total Claim Amendment Fee							0			
TOTA	\$	0								
	Charge to Deposit Account No. 02-4800 for the fee due.									
	A check in the amount of is enclosed for the fee due.									
	Charge to credit card for the fee due. Form PTO-2038 is attached.									

☐ Charge_____ to credit card for the fee due. Form PTO-2038 is attached.
 ☑ The Director is hereby authorized to charge any appropriate fees under 37 C.F.R. §§ 1.16, 1.17 and 1.20(d) and 1.21 that may be required by this paper, and to credit any overpayment, to Deposit Account No. 02-4800. This paper is submitted in duplicate.

By:

Respectfully submitted,

BUCHANAN INGERSOLL & ROONEY PC

Date MAY 27, 2007

David R. Kemeny

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